

**ALUMNUS AND DESCENDANT INFORMATION FORM
TO QUALIFY FOR MHSPAA LIMITED SCHOLARSHIP AWARD APPLICATION**

If you are an Alumnus of the MHPSAA, i.e., having resided in the Masonic Homes or Patton School for a period of at least one year, **complete the first portion** of this form.

Name of Applicant _____ Phone No. _____

Current Address _____

City, State, Zip _____

Year Entered MH _____ PS _____ Year Graduated or Left _____

How many children are still living at home? _____

If you are a direct lineal descendant of an Alumnus, who is or was a 'Member in Good Standing' of the MHPSAA, please **complete this section** of the form:

Name of Applicant _____ Phone No. _____

Current Address _____

City, State, Zip _____

Are you currently enrolled in College? _____ If so, where? _____

Name of Alumnus _____ Relationship _____

What year did he/she graduate? _____

Is the Alumnus living or deceased ? _____ Date of Demise _____

If Living, Current Address _____

City, State, Zip _____

Is or Was he/she a 'Member in Good Standing'? _____

Who informed you about the MHPSAA Scholarship? _____

Signature of Applicant _____ Signature of Alumnus _____